

PARTNERSHIP DEVELOPMENT GROUP

Supporting The Organizations Who Support Medicare



ANNUAL REPORT ON ACTIVITIES:

October 1998 - September 1999

Center For Beneficiary Services
Health Care Financing Administration
Department Of Health And Human Services



**HCFA's
PARTNERSHIP
DEVELOPMENT
GROUP**

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**Fiscal Year 1999
(Oct. 98 through Sept. 99)**

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Health Care Financing Administration
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EXECUTIVE SUMMARY

The Health Care Financing Administration that administers Medicare established a new national office in 1997 to develop and support a broad range of partnership activities. The Partnership Development Group sits in HCFA's Center for Beneficiary Services, a new HCFA component that focuses on consumer interests.

PDG's mission: to promote public understanding and support for HCFA programs through partnerships with public and private sector groups. This is consistent with a broader Agency vision as a beneficiary-centered purchaser of health care services.

PDG has succeeded over the past year in creating and supporting a broad range of partnership activities focusing chiefly on the Medicare + Choice program, which expanded the range of managed care options permitted in Medicare. **One key PDG success is the Alliance Network** of the National Medicare Education Program (NMEP), which informs over **130 national organizations** representing over 94 million people on up-to-date developments in the Medicare + Choice program. Alliance Network members, in turn, help their own audiences learn more about Medicare.

PDG's recent accomplishments included a broad range of key partnering activities.

- > **Maintaining regular contact with national advocacy groups** and Alliance Network partners builds productive long-term relationships that strengthen HCFA's ability to serve beneficiaries' interests. In the past year, this collaboration helped HCFA improve criteria for HMO marketing materials and standardized benefits packages, and react effectively when some HMOs elected not to renew their Medicare + Choice contracts.
- > **Building innovative public-private partnerships** allows HCFA to pursue joint projects serving the Agency's beneficiaries. PDG's efforts with employers led to key national conferences on retiree issues in Medicare + Choice, and projects with the American Library Association helped equip librarians to find Internet-based Medicare information. Roundtable discussions with the foundation community brought new funding for community projects targeting special Medicare populations.
- > **Managing a 'partner web site'** and other outreach activities provides Alliance Network partners and other information intermediaries ready access to timely information about Medicare. The NMEP 'partner web site' is at www.nmep.org.

This Report offers more details on these and other PDG activities, plus background on PDG's staffing and future plans.

ACKNOWLEDGMENTS REGARDING THIS REPORT

This Annual Report is a product of the Partnership Development Group (PDG) in HCFA's Center for Beneficiary Services (CBS), intended to outline the Medicare program's recent accomplishments in partnership-building and opportunities for further action.

Special thanks go to Carol Cronin and Michael McMullan, Director and Deputy Director of CBS, for their support of partnering activities. Particular thanks and congratulations go to Eric Katz, Deputy Director of PDG for drafting the Report and to all the dedicated members of the PDG team.

Quotes in the margin of this Report come from a discussion draft of a formal evaluation of the [NMEP] Alliance Network, prepared by Abt Associates in 1999 at PDG's request.

For further information, contact Eric Katz at (410) 786-6477, EKatz@hcfa.gov.
prepared: October 29, 1999

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DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH CARE
FINANCING
ADMINISTRATION

Center for Beneficiary Services
7500 Security Boulevard, S1-08-07
Baltimore, MD 21244-5187

October, 1999

Dear Colleagues:

What an exciting year to be in public service, and what a privilege to be building innovative partnerships to help consumers understand the programs of the Health Care Financing Administration (HCFA).

This past year, HCFA's Partnership Development Group (PDG) joined the rest of the Center for Beneficiary Services in a 'call to action' to support the National Medicare Education Program (NMEP). The NMEP, better known as the *Medicare & You* campaign, has been a significant force in helping Americans understand their new health plan options under the Medicare + Choice program. HCFA's partnership efforts have been a key element of the campaign's success.

Although PDG is small, we have built giant-sized results over the past year. This report points to projects as diverse as the Alliance Network of national partners in the *Medicare & You* campaign; public-private partnerships involving foundations, providers of retiree benefits and others; government partnerships including Social Security and the '4-H;' and other HCFA priorities entrusted to PDG such as consumer outreach on the Y2K issue.

We hope you'll look over the group's accomplishments and find areas that relate to your own interests and your own needs. In our view, an effective partnership benefits every participant, and could even include your organization. We invite you to contact us with ideas that might serve your own group's interests in ways consistent with HCFA-PDG program goals, and we look forward to hearing from you.

Best regards,

Lis

Elisabeth A. Handley
Director,
Partnership Development Group

Eric

Eric M. Katz
Deputy Director,
Partnership Development Group

PDG: What We Do

PDG's mission in the Health Care Financing Administration (HCFA) is:

to promote excellence in HCFA's collaborations with organizations in the public and private sectors, serving joint projects that improve the nation's understanding, support, and use of Medicare and other HCFA programs.

We serve these goals by:

- > building an environment conducive to HCFA partnership activities;
- > developing a range of innovative partnership projects, consistent with HCFA's mandate and mission;
- > supporting regular communication with HCFA's key partners and stakeholders; and,
- > addressing selected special projects, often on short notice, that have a particular impact on HCFA's national partners and stakeholders.

This work fits into the broader goals of HCFA and its Center for Beneficiary Services, which target beneficiary outreach and education as a key pathway toward building beneficiary satisfaction with HCFA programs, and toward establishing health security for all Americans.

KEY ACCOMPLISHMENTS IN FISCAL 1999:

PDG has built and managed a broad range of partnership activities serving Medicare. In addition, a number of fast-breaking Agency needs have fallen to PDG in the past year, such as beneficiary outreach regarding Y2K issues and various publicity and promotion plans for the Medicare & You campaign, that fall outside the mainstream of partnership building but showed a potential for major impact on HCFA's key national partners and stakeholders.

The following pages highlight seventeen of PDG's key contributions over the past year:

1. Growing the Alliance Network.

Under PDG's development and management, the *Medicare & You* Alliance Network now includes over 120 national organizations united in their desire to bring accurate and timely information about Medicare + Choice to their own members and audiences. These groups now represent over 94 million Americans and a range of opinions and concerns, all joined by a common need to share information about Medicare with a far broader audience than HCFA could reach single-handedly.

The Network is a new approach in HCFA's outreach and education efforts, targeting national groups whose own efforts and whose members depend on timely and accurate information about Medicare. PDG account representatives have recruited these groups, built and maintained strong relationships, and kindled new enthusiasm for the positive impact of the Medicare program on people's lives.

This Alliance Network has proven an invaluable asset in education and outreach around the *Medicare & You* campaign, both in disseminating important messages to their own audiences and in providing essential "real world" feedback about the greatest needs in the community. This was particularly true in the past year when the number of HMO nonrenewals and service area reductions exceeded expectations, and continues to play an important role in Y2K outreach and other emerging issues.

"The use of partnering for information dissemination was a new strategy for HCFA."

"Prior to 1998, HCFA Central Office had never taken on such extensive outreach as it did for the NMEP."

"Our expectation was that we were going to be in a better position to educate our members."

HCFA's independent evaluation of the Alliance Network confirmed the value of PDG's activities -- quotes from the Abt Associates draft evaluation report appear frequently in the margins of this PDG Annual Report. PDG will continue working to improve the Alliance Network initiative and enhance its contribution to quality and satisfaction in the Medicare program.

2. Strengthening the Coordinating Committee.

The top tier of the *Medicare & You* Alliance Network is the Coordinating Committee, which held five meetings in 1998-99. Its 66 members include groups who don't normally sit together around a single table: providers, advocacy groups, payers, employers, unions, and government agencies.

The rapid assembly of the Coordinating Committee and the strength of its activities is a testament to the national importance of the *Medicare & You* campaign, the skills of PDG's account representatives, and the goodwill of the members themselves. The process allows these groups to reach their millions of members with timely information about Medicare + Choice, but also provides HCFA a unique chance to join a range of other interest groups for sharing important research, anecdotes and ideas.

The value of a strong public-private dialogue became clear when new "twists" in the M+C program unfolded, such as managed care plan nonrenewals and service area reductions. PDG responded with special updates for the Coordinating Committee as news was reported, as well as special meetings to review the potential impact on people with Medicare. As a result, Alliance Network partners were armed with timely, accurate information to share with their constituents and staffers, and America was informed but not frightened.

"The primary reason that most elected to become Coordinating Committee members was to be in a better position to get information from HCFA."

"I had absolutely no problem going into H C F A t o g e t information, to get help, to get assistance."

3. Targeting the Alliance Network initiatives: Employers, Caregivers, Translations.

As the Alliance Network developed, partners identified areas where special-purpose subcommittees would serve important common needs. As a result, PDG has supported special initiatives addressing: “employers” and other providers of retiree health benefits whose programs must complement Medicare; “caregivers” such as family members who help in decisionmaking; and, “translations,” addressing the need for M+C materials in languages beyond English and Spanish.

One result was an initiative to produce key HCFA materials in additional languages. PDG played an important role, for example, in building Asian language translations of the *Medicare & You* Handbook into Mandarin, working with HCFA’s Seattle office and the National Asian Pacific Center on Aging, an Alliance Network member.

In addition, PDG is recruiting educational affiliates including high-tech organizations and Internet-based information providers to serve the growing opportunities for online communications. The Caregiver initiatives have grown into a free-standing national coalition with important HCFA-wide participation.

“There have been a variety of parties around the table . . . and a lot of issues that were really difficult, and people really came together to . . . find solutions.”

4. Creating a National Focus on Caregivers.

The Medicare program traditionally has focused its consumer information role on the 39+ million beneficiaries of the Medicare program. PDG recently established *Medicare & You* projects that target the information needs of family members and other caregivers. Response by public- and private-sector national groups was quite enthusiastic, proving the value of education and support projects aimed at the “caregivers” of today’s Medicare population. Three national invitational roundtables in fiscal year 1999 pulled together an unprecedented range of organizations, who found a common focus in the health information needs of seniors and their families.

“Another positive thing . . . was to bring together a network of people to do a better job of educating caregivers.”

PDG is serving as the convener of these meetings and is participating as an equal partner. We are working toward synergy among the participating organizations and looking to others to take on leadership roles in pursuing innovative projects to educate caregivers about Medicare.

Specific partnership projects may become one key result of this "caregivers" initiative, but the broader impact will include better support in general for current beneficiaries and their family members from a variety of public- and private-sector sources. These caregivers aid today's Medicare beneficiaries, and also represent HCFA's "beneficiaries of tomorrow," giving HCFA two compelling reasons to provide information and other assistance to the caregiver community.

"I actually think HCFA's role is to build and to have coalitions and to help foster coalitions and to help communicate at the local level."

5. Assembling a National Advisory Panel on Medicare Education.

While the Alliance Network has achieved positive results, there are significant legal constraints on the scope of 'coordinating' that a Coordinating Committee can achieve. One significant barrier is the Federal Advisory Committee Act, which limits the Coordinating Committee to a focus on information dissemination rather than collective policy guidance or decisionmaking.

"You can't really deal with some of this education stuff without your policy folks or your regulatory folks sitting at the table."

To allow for public input into pending Agency decisions and other key *Medicare & You* activities, PDG is developing a formal Citizens Advisory Panel on Medicare Education (APME) that will provide annual recommendations on ways to enhance consumer education in M+C. A great deal of organizational work took place in fiscal 1999 in PDG, including the details for logistical support and the detailed legal and policy review of membership nominations. With further PDG effort, HCFA will be ready to convene the group's inaugural meeting early in the year 2000.

"It is very difficult for an arm of the Federal bureaucracy to go outside of itself to seek information and then to take that information and do something useful."

6. Working With Employer Trade Groups to Educate Retirees.

PDG worked with the Employers' Managed Health Care Association (MHCA), an organization that represents many

Fortune 500 companies and their health benefit concerns for their employees and retirees, to hold two successful conferences on Medicare + Choice in 1998.

For each conference, PDG helped to develop the agenda and arrange appropriate HCFA speakers. MHCA staff and its members evaluated these conferences very highly. MHCA staff and PDG staff have developed a very effective working relationship in staffing the HCFA Alliance Network Subcommittee on Employers as well as taking appropriate action to address issues of common concern.

As a result, employers and other providers of retiree health benefits have been able to craft their benefits to coordinate well with Medicare + Choice, and have kept their own constituencies well-informed about changes in the Medicare system and ways to make effective decisions about health care coverage.

PDG also worked with the Washington Business Group on Health to design a "Working Session for Employers" on Medicare + Choice, and with key labor unions and other providers of retiree benefits to ensure timely and accurate information about employer-based health coverage. Also, through the Coordinating Committee PDG provides technical assistance to employee benefit consulting firms, to ensure that the programs they develop for the nation's largest employers are based on an up-to-date understanding of the Medicare program.

7. Publicity & Promotion for the *Medicare & You* Campaign.

In the 1998-99 fiscal year, HCFA faced a tremendous challenge to build a comprehensive "publicity and promotion" plan to serve the National Medicare Education Program. PDG collaborated with other CBS groups and expert marketing consultants, and built an extensive framework for M+C publicity now known as the *Medicare & You* promotion campaign.

Implementing this plan has brought many impressive results. One key product was a graphic mark and tagline reading, "*Medicare & You*: the knowledge to make good decisions." The mark tested well in focus groups, and is now used HCFA-wide to "brand" all of CBS's numerous M+C products. We also crafted guidelines for partners on how to use the mark appropriately.

PDG also worked to promote *Medicare & You* in other publications -- HCFA's and our partners'. Examples:

- ! distributing a matte release for newspapers, reaching 55 million readers in 27 States with information on the newly developed 1-800-MEDICARE (1-800-633-4227) toll free line;
- ! building another matte release to highlight the "medicare.gov" website nationwide;
- ! adding "1-800-MEDICARE" information to managed care summary of benefits standard marketing materials;
- ! placing the number in AARP's *Modern Maturity* with 55 million readership; and,
- ! partnering with Social Security to include M+C information in over 50 million annual Cost of Living Notices.

These steps brought important new visibility to M+C without spending a dime.

Another key result was a new Internet website developed specifically for Alliance Network partners. The website has been an excellent way to make beneficiary materials available to partner groups (by downloading) and to disseminate timely information. PDG also created a partner kit of "hard-copy" materials such as ad slicks and flyers for partner use.

Other results included: a series of "blast faxes" to key media contacts; a new M+C press contact list in five "pilot" States, and later nationwide, for press officers in HCFA and HHS; and a clipping service on M+C and the toll-free line shared broadly throughout HCFA. Taken together, these results brought *Medicare & You* a comprehensive context for the publicity and promotion campaign.

HCFA "really made an effort [on the partner website], they've done a good job. More and more people will be going on it."

The partner websites "are the best thing they've [HCFA] done as a model."

8. Supporting Librarians as Partners in Medicare Education.

In 1999, the first beneficiary Handbook describing Medicare + Choice offered suggestions for where to find additional information on today's Medicare program, including the advice to ask "your local library." At the time, though, HCFA had not built any formal relationship with the library community to make Medicare a focus for their information and assistance efforts.

PDG worked on several fronts toward effective collaboration with the community of professional librarians, resulting finally in a partnership with the American Library Association (ALA). The project involved new Internet resources for librarians seeking Medicare information, development of a special, hard-bound edition of the Medicare handbook, targeted resource materials for librarians and similar information intermediaries, and special E-mail alerts and other materials distributed by the ALA. HCFA also met with ALA leadership during their executive board sessions and displayed at the ALA annual meeting to promote these partnership arrangements.

As a result, HCFA can now confidently ask beneficiaries to contact local libraries for up-to-date Medicare information, secure in the knowledge that they are equipped to serve.

9. Making the Inter-Generational Link: Kids, Seniors, Medicare & the Internet.

PDG built an innovative partnership to help seniors 'surf the net' with the Department of Agriculture (USDA), which coordinates the 4-H youth organization. This project allows youngsters from 4-H's computer-savvy Technology Corps to introduce seniors to the internet and orient them to the features found on HCFA's Medicare.gov website.

The 4-H teens teach Medicare beneficiaries how to get information and publications, and how to access comparative information on health plans and nursing homes on the Medicare.gov website. In September, 1999,

PDG and USDA began a well-received pilot of this intergenerational program in seven States, and in the year 2000 plans to expand the partnership nationwide.

The “teens helping seniors online” concept has garnered positive press coverage and recognition from the Vice President’s National Performance Review, which further helps publicize the value of intergenerational partnerships serving the Medicare program.

10. Reaching Out to the Foundation Community.

Medicare shares many common interests with the foundation community, such as expanding the “local infrastructure” that assists seniors navigating the health care system. Private foundations, however, typically avoid projects they view as “government’s responsibility.” Successful HCFA collaboration with foundations, then, must involve projects where each side sees a compelling nexus to its mission.

PDG is providing the forum to identify likely areas of collaboration between the *Medicare & You* campaign and the foundation community. In the Fall of 1998, PDG began a small policy roundtable with ‘Grantmakers in Health,’ an umbrella group providing policy and technical resources for over 400 health-related foundations. The results led to another joint session in November and a third invitational conference in June, all designed to raise awareness in the foundation community about the impact of Medicare + Choice on vulnerable populations.

The resulting linkage is already showing results, such as foundation grants to SHIPs underwriting internet access in California and other local grantmaking programs. PDG intends to continue these efforts, and to involve HCFA’s regional offices in building partnerships with community-focused foundations.

11. Focusing on Beneficiary Concerns in the 'Y2K' Arena.

HCFA has made extensive preparations for Y2K to ensure that its computer systems are ready. HCFA is also one of a unique handful of agencies that has developed Y2K outreach plans for the populations it serves. Beneficiary outreach plans for the Medicare, Medicaid, and State Children's Health Insurance Programs fell to PDG, due in part to PDG's success in building publicity plans for the *Medicare & You* campaign.

PDG identified expert advisors and contractors, worked with regional offices and undertook research to evaluate the extent of the need in the community, and made quick assessments of what was needed. The answer, a small-scale effort at information and outreach coupled with contingency plans for direct mailings and public relations efforts as needed, met with HCFA's approval and is now swinging into full gear.

Although other partnership initiatives have gone "on hold" as PDG's focus turns to Y2K, the investment seems most worthwhile as HCFA learns that people with Medicare still trust their health care system and that their Y2K concerns about their Medicare coverage are appropriately minor.

12. Hosting Monthly Sessions with Beneficiary Advocacy Groups.

Although the Alliance Network focuses on Medicare + Choice, the many national partners focusing on beneficiary interests are interested in a broader range of HCFA programs and issues. Over the years, HCFA has learned that relying on piece-meal communications with these groups from a large number of HCFA offices cannot provide the kind of coordinated and thoughtful relationship the Agency wants and needs with these groups.

To meet this need, PDG holds regular monthly meetings with national advocacy organizations. Topics are

developed in partnership with the participating groups, including both recent HCFA developments and a range of policy issues that impact HCFA's future program directions and the course of the health care system. Nearly every component in HCFA has used these meetings as a forum to communicate recent developments and to learn about new developments in the beneficiary community.

13. Building the Annual Beneficiary Service Awards Ceremony.

In administering HCFA programs, the Agency depends on an infrastructure of dedicated local advocates, most of them volunteers, who provide information, referral, and support to beneficiaries across a range of medical and related topics. Each year, HCFA recognizes a small number of these individuals and groups for outstanding service to the beneficiaries of Medicare, Medicaid, and the State Children's Health Insurance programs.

PDG has the privilege of managing this awards process, from design through execution. This begins with soliciting and reviewing nominations, to documenting the information provided and checking for conflicts of interest or other facts that could interfere with an appropriate award. The final step is the award ceremony itself, which in June 1999 took place in Miami Beach, in conjunction with HCFA's annual Customer Service conference.

14. Providing Training & Resources for Regional Office Partnering Initiatives.

Because partnerships on the community level are so important to the success of HCFA's programs, PDG acknowledges the ten HCFA Regional Offices as an important constituency for PDG efforts.

One key PDG effort to serve the RO audience was a national training event that brought regional and central office staffers together to learn "best practices" in building public-private partnerships and ways to apply them. The sessions, held in St. Louis in July, 1999 and co-sponsored

with the Kansas City Regional Office, included presentations from national corporations, foundations, federal agencies, and others who have built successful partnerships with the Medicare program to serve beneficiaries. The result of the sessions was a "Road Map" for RO leadership in partnership building.

Due to RO requests, PDG has already begun planning a similar training program for next year to share specific, actionable strategies for successful partnerships.

15. Preparing HCFA for Information Partnerships with High-Technology Firms.

The future of disseminating health information will surely be "The Internet." Whether that day has already arrived or is still years from pervasive impact may depend on perspective -- Medicare beneficiaries may not be 'wired' to the same extent as younger audiences, but their children and their other information intermediaries certainly are on-line, and use among physicians has risen four-fold to almost 80% from 1998 to 1999.

PDG has built the guidelines and procedures that would support the involvement of high-tech firms and on-line information providers in the Alliance Network, and has begun pulling together projects to set the stage for a range of novel public-private opportunities for electronic information dissemination. As a result, when HCFA's publications offices seek partners for online projects, PDG will have partners, projects, and guidelines available.

16. Helping Seniors Learn the Internet: Collaboration on Consumer Pamphlets.

PDG has been working with AARP and the Jewish Council for the Aging of Greater Washington, including its two SeniorNet Learning Centers, to develop a basic set of senior-friendly directions for seniors to access the Medicare website. This product will be a trifold brochure and will be distributed nationwide to all HCFA partners.

AARP has provided facilitators to work with us and these seniors. PDG now has a quality working draft, with plans to proceed to publication in the next few months. AARP has also stated that it will print additional copies of the trifold brochure after its initial HCFA printing.

17. Building a Focal Point For Partner Access to HCFA.

PDG has taken a leadership role in getting the views of advocates and partners to appropriate HCFA staff and into HCFA's deliberations on pending projects.

As one illustration, PDG was responsible for getting representatives of partners (e.g., beneficiary advocacy groups, provider groups, and employers) involved in HCFA's Standardization of Benefits Workgroup, serving other CBS staff and the Center for Health Plans and Providers. The success of this workgroup is now held as a standard for successful HCFA/partner joint efforts.

PDG was also very active in convening a series of meetings and conference calls for employers and corporate benefit consulting organizations to meet with staff of the Beneficiary Membership Administration Group (BMAG) to discuss enrollment, special election periods, and other Medicare retiree issues regarding employer group health plans. These meetings have even led to modification and clarification of Medicare policies including issuance of HCFA Operational Policy Letters.

The success of these exchanges has led to staff from PDG and BMAG collaborating on planning for a partner/employer workshop in March, 2000, where employers and corporate benefit consulting organizations can discuss outstanding enrollment issues of concern to them with HCFA staff.

PDG also requested and received local affiliate information from those partners who had a network of local representatives around the country. PDG shared this information with the 10 HCFA regional offices so they could approach these local affiliates to become members of local, state, or regional partnerships. This would

"One of the things I think has been most valuable about the Coordinating Committee is the cross-fertilization that's occurring."

enhance the reach of the Alliance Network in getting Medicare information to beneficiaries.

WHERE WE'RE HEADING

Over the next year, PDG will be continuing its momentum in building innovative partnership opportunities. Here's a preview:

-- Foundations

A pilot project of PDG-sponsored meetings will help introduce private health-related foundations to selected HCFA regional offices. The goal is to identify opportunities for collaboration on community-based infrastructure projects serving the information needs of seniors who need to navigate the health care system. PDG's partnership with Grantmakers In Health is a key relationship toward building this kind of collaboration with the foundation community.

-- Y2K Issues and Beneficiary Outreach

Beneficiary outreach on the Y2K issue will be a major activity for PDG in the months leading up to January 1, 2000. Contingency plans for beneficiary service and education in the year 2000 are also an important project, although obviously the hope is these contingencies will not prove needed.

-- Training HCFA colleagues in partnership development

Even the work of building effective partnerships is, itself, a partnership activity. PDG's efforts are important, but other HCFA colleagues play essential roles in building a range of successful partnerships serving HCFA's programs and the American people. PDG will sponsor formal training programs and informal collaborations to encourage a broader base of partnership activities in the Regional Offices and in other Central Office components, and to build model "partner-ready" projects for their use.

-- Collaboration with other federal agencies

When looking for partners, it's not necessary to search far beyond HCFA's own backyard. Many other federal agencies have interests related to HCFA programs, and PDG is determined to build innovative collaborations. Now under development are: a video with the Social Security Administration on Medicare topics targeted to "caregivers," expanded collaboration with the 4-H program at USDA, and joint outreach activities (VA, DoD) targeting America's veterans.

-- Advisory Panel on Medicare Education

The Secretary of HHS established a formal advisory panel to provide recommendations on improving Medicare education in HCFA, and PDG is working toward appointments, work plans, and an inaugural meeting early in the year 2000.

WHO WE ARE

The Partnership Development Group is one of seven groups in the Center for Beneficiary Services in the Health Care Financing Administration. PDG works out of HCFA's Central Office to serve both CBS programs and the Regional Offices with a range of partnership activities. As of September 30, 1999, the Group consists of the following staff.

PDG Leadership:

Elisabeth R. Handley, Director, PDG

Lis Handley joined CBS when it was formed in 1997. Previously, she was the Acting Director of the Managed Care Office in HCFA and held numerous other management positions regulating HMOs with Medicare and Medicaid contracts. She also performed qualitative evaluation of HHS programs for the Office of Inspector General (such as medical licensure and discipline issues and teenage alcohol abuse) and was a Presidential Management Intern in the Social Security Administration.

Prior to her federal career, she directed two advocacy organizations in Tallahassee, Florida, where she got her B.A. and Masters in Public Administration from Florida State University. Lis can be reached at EHandley@hcfa.gov, or at (410) 786-1563.

Eric Katz, JD, Deputy Director, PDG and Dir., Research Partnerships

Eric focuses on innovative public-private partnerships and on PDG's relationships with high-tech firms, foundations, and research-based organizations. He also serves as Executive Director of the Advisory Panel on Medicare Education, a national initiative to enhance HCFA's consumer education initiatives in the Medicare + Choice program. In 1999, Eric received the HCFA Administrator's Award for his initiatives with the foundation community.

Eric joined HCFA after building public-private partnerships in other HHS agencies and in the private sector. He received his degree in Management of Non-Profit Organizations from the Wharton School, plus a law degree from the University of Texas where he was Editor of the Law Review. Eric was also a Senior Fulbright Scholar in Berlin, examining health care reforms. Eric is reachable at EKatz@hcfa.gov, or (410) 786-6477.

PDG Analysts

Kelly DiNicolo is working on HCFA's beneficiary outreach initiatives on Y2K issues. She joined HCFA as an Outstanding Scholar in 1994. During that time, Kelly held various positions in HCFA's Central and Philadelphia Regional Offices, developing and implementing various consumer, advocate, and partner outreach activities as well as training programs including, Medicare + Choice.

Kelly holds a B.S. and Masters of Business Administration with a concentration in Marketing from the University of Baltimore. She can be reached at KDiNicolo@hcfa.gov, or (410) 786-0046.

Rena Judy works with the Coordinating Committee toward setting policy directions and specific meeting agendas, and has built and managed partnership projects with the 4-H program at USDA and with the American Library Association. She has a broad range of understanding of HCFA programs and public policy initiatives, and served as Executive Assistant to the HCFA Administrator for many years. In 1999, Rena received the Administrator's Award for her work with caregiver initiatives. Rena can be reached at RJudy@hcfa.gov, or at (410) 786-1076.

Harriet Kelman works with professional and trade associations in the Alliance Network, and is expert in a range of managed care issues. One recent example involves her successful outreach to partner groups as HCFA considered options for "standardization of benefits" descriptions in managed care plans. Harriet can be reached at HKelman@hcfa.gov, or at (410) 786-1074.

Paul Mendelsohn has taken a leadership role in HCFA's advocacy projects for disabled Americans, and works with some of the employer groups in the NMEP Alliance Network. Paul also presents sensitivity and awareness training on disability issues within HCFA and for HCFA partners. Paul's E-mail is PMendelsohn2@hcfa.gov, his phone is (410) 786-3213.

Steve Miller has helped in the strategy, design, and production of a variety of print materials to serve partner needs, and is helping lead PDG's outreach initiatives with the foundation community. Among his earlier accomplishments in his years in HCFA, he managed demonstration projects known as Program of All-inclusive Care for the Elderly (PACE) and their later integration into HCFA legislation and operation. In 1999, HCFA gave Steve an ESA Award for sustained superior performance.

Prior to joining HCFA, he was involved with county health departments in Maryland to enhance rehabilitation programs, was director of a medical equipment manufacturer, and was a physical therapist in the U.S. Army at Walter Reed General Hospital. Steve holds a Masters in guidance and counseling from Springfield College and is a physical therapy graduate of the University of Maryland. His phone is (410) 786-6656, E-mail is SMiller1@hcfa.gov.

Carol Sampson manages monthly meetings between HCFA officials and national advocacy organizations involved in health or disability matters, and runs HCFA's annual Beneficiary Service Awards program. Carol is also involved in organizing HCFA's upcoming Advisory Panel on Medicare Education. Carol's E-mail is CSampson@hcfa.gov, phone is (410) 786-3210

Spencer Schron has led PDG's efforts to engage employers and unions in partnership activities. He has also been active in: building the caregiver initiative; working with SSA on a Medicare video for caregivers; developing a brochure for seniors on navigating the Internet to find Medicare information; planning an employer and union conference on employer and union group health plans; and,

coordinating a joint conference with OPM for Federal employees and employee assistance program professionals on caregiver issues and Medicare. Spence received the Administrator's Award in 1999 for his outreach efforts with the employer community and with national caregiver groups.

Spencer Schron has a Master's Degree in Political Science from The Ohio State University, a Master's Degree in Medical Care Administration from the University of Michigan School of Public Health, and over 30 years experience in the health care field. Spence can be reached at SSchron@hcfa.gov, or (410) 786-1075.

Joe Slattery focuses on consumer outreach efforts including Y2K awareness and various "information and referral" projects including SHIP outreach and satellite training initiatives. Previously, Joe was Director of the State Health Insurance Assistance Program in Arizona, where he represented the states in federal regions IX and X to the National Insurance Counseling and Assistance Steering Committee and served on a task force appointed by the Arizona Governor to develop legislation providing HMO enrollees a standard grievance and appeals procedure.

Joe is a graduate of the United States Naval Academy, and spent eleven years on active duty in a variety of naval aviation and public relations positions. He then spent twelve years in the insurance industry in sales, training and management positions before joining the public sector. Joe's phone is (410) 786-0258, E-mail is JSlattery@hcfa.gov.

Lisa Weller has over 20 years of experience in various aspects of the Medicare program. Currently, Lisa manages a contract that assists CBS in developing the Partners Alliance Network, NMEP campaign materials, and the Partners website. She also serves as PDG's Account Representative for the Social Security Administration.

Before joining PDG, Lisa was involved in redirection of the Peer Review Organization Program to a focus on projects promoting quality health care services for Medicare beneficiaries, *e.g.*, increasing flu shots in the Medicare population through outreach efforts and educating providers about the use of antibiotics prior to surgery. Her phone is (410) 786-5488; E-mail is LWeller@hcfa.gov.

PDG Administrative and Program Support

Susan Alt, Secretary to PDG, can be reached at (410) 786-0279 or SAlt@hcfa.gov, and

Linda Levin, Health Insurance Assistant, can be reached at (410) 786-4616 or LLevin@hcfa.gov.

PARTNERS ROSTER

We wouldn't be here, except to serve our partners. So here they are, the members of the Alliance Network (as of late September, 1999), in alphabetical order by category including the key contact person in each organization. PDG offers our heartfelt thanks for an exciting and productive year, plus the deep gratitude of the Director of CBS, the Administrator of HCFA, and all the senior officials responsible for maintaining a strong and efficient Medicare program.

Coordinating Committee

1. AARP - C. Anne Harvey and Ava Baker
2. Administration on Aging - Edwin Walker
3. AFL-CIO - Carol Eickert
4. AlliedSignal Inc. - Stacey Houston
5. Alzheimer's Association - Katie Maslow
6. American Association of Health Plans - Candace Schaller
7. American Association of Homes and Services for the Aging - Judy Peres
8. American Bar Association, Commission on Legal Problems of the Elderly - Leslie Fried and Erica Wood
9. American Federation of Teachers - John Abraham and Frank Stella
10. American Hospital Association - Ellen Pryga
11. American Medical Association - Carol Vargo
12. American Society on Aging - Gloria H. Cavanaugh
13. Arthritis Foundation - Mary N. Long
14. Bell Atlantic Corporation - Sheila E. Meehan
15. Blue Cross Blue Shield Association - Julie Miller
16. CHAMPUS/ TRICARE, Department of Defense - Ernestyne Forbes
17. Citizen Advocacy Center - Rebecca LeBuhn
18. Consumer Coalition for Quality Health Care - Brian Lindberg
19. EDS - Jeff Broocks
20. Employers' Managed Health Care Association - Pamela Kalen
21. Families USA Foundation - Kathleen Haddad
22. General Electric - Jeff Scardino
23. General Motors Corporation - Maria Lyzen
24. Georgetown University Medical Center Institute for Health Care Research and Policy - Geraldine Dallek
25. Health Insurance Association of America - Marianne Miller
26. Health Resources and Services Administration (HRSA), Bureau of Primary Health Care -Julia Tillman
27. Hewitt Associates - Frank McArdle

28. InterAmerican College of Physicians and Surgeons - Rene Rodriguez, M.D.
29. International Brotherhood of Teamsters – Eileen Smith
30. International Longevity Center - TBD
31. Joint Commission on Accreditation of Healthcare Organizations - Anthony J. Tirone
32. Medicare Rights Center - Rachel Ramos and Jane Yoon
33. National Asian Pacific Center on Aging - Clayton Fong and Dr. Donna Yee
34. National Association of Area Agencies on Aging - Adrienne Dern, Janice Jackson
35. National Association of Community Health Centers - Chris Koppen
36. National Association of Health Underwriters - Nancy Trenti
37. National Association of Insurance Commissioners - Marcia Marshall
38. National Association of State Units on Aging - Daniel A. Quirk and Sara Aravanis
39. National Caucus and Center on Black Aged - Nancy Caliman and Larry Crecy
40. National Committee to Preserve Social Security and Medicare - Danielle Jones
41. National Council of La Raza - Yanira Cruz Gonzalez
42. National Council of Senior Citizens - Daniel Schulder and Fredda Vladeck
43. National Council on the Aging - Susana Perry
44. National Hispanic Council on Aging - Michael Guerrero
45. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases - Mimi Lising
46. National Institutes of Health, National Institute on Aging - Karen Pocinki
47. National Organization for Rare Disorders - Abbey Meyers
48. National Osteoporosis Foundation - Bente Cooney
49. National Senior Citizens Law Center - Vicki Gottlich, Esq.
50. Older Women's League - Kathy Ceja and Sarah Gotbaum
51. Philip Morris - Lisa Halle
52. PricewaterhouseCoopers - Kelly Traw
53. PSEG - Kathy Kostecki
54. Railroad Retirement Board- Lawrence Payne
55. Seabury & Smith - Susan Hussar and Bob Nolan
56. Service Employees International Union - Rosalie Whelan
57. State Health Insurance and Assistance Program - Janis Cheney and Penelope Lantz
58. Towers Perrin - Joe Martingale and Kevin McCarthy
59. Union Carbide Corporation - Teri Ferguson
60. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation - John Cutler and Jack Hoadley
61. U.S. Department of Labor, Pension and Welfare Benefits Administration - Deborah Mile
62. U.S. Office of Personnel Management, Office of Insurance Programs - Ellen E. Tunstall
63. VHA Inc. - Ed Goodman
64. Visiting Nurse Associations of America - Pamela P. Sawyer
65. Watson Wyatt Worldwide - Karen Kissam and Mark White
66. William M. Mercer, Inc.- Chip Kerby

Task Force

1. Alliance of Genetic Support Groups - Mary E. Wilson
2. American Music Therapy Association - Judy Simpson
3. American Nurses Association - K. Reeder Franklin
4. Americans for Better Care of the Dying - Janet Heald Forlini
5. Consultants for Corporate Benefits, Inc. (CCBI) - Aimee Schenkel
6. Cooperative State Research, Education and Extension Service,
Department of Agriculture - Anna Mae Kobbe
7. General Services Administration's (GSA's) Consumer Information Center -
Linda O'Neil
8. Indian Health Services - Ronald Freeman
9. LTV Steel Company - Russell Lloyd
10. Mobil Corporation - Gayla F. Heath
11. National Alliance for Caregiving - Gail Gibson Hunt
12. National Association for Home Care - Jeff Kincheloe
13. National Association of Manufacturers - Sharon Canner
14. National Council on Patient Information and Education - Ray Bullman
15. Paralyzed Veterans of America - Jennifer Podulka
16. People's Medical Society - Michael A. Donio
17. Resource Connectors, Ltd. - Casey Mile
18. Sears, Roebuck and Co. - Marybride Misar
19. Social Security Administration - Philip Gambino
20. SPRY Foundation - Elysa Darling, Thomas B. Hoppin

Educational Affiliates

1. 60 Plus Association - Dr. Don Senese
2. Aging Services, Inc. - Dan Strenner
3. Alliance for Aging Research - Penelope Catterall
4. American Academy of Family Physicians - Michele Johnson
5. American Airlines - Ramona Alexander
6. American Medical Rehabilitation Providers Association - Carolyn Zollar
7. American Network of Community Options and Resources - Suellen Galbraith
8. Assisted Living Federation of America - Beth Singley
9. Association of Jewish Aging Services - Lawrence Zippin
10. Ball State University, Center for Gerontology - Dr. Royda Crose
11. Catholic Charities, USA - Jane Stenson
12. Eastman Kodak Company - Jan Peckham
13. Guide to Retirement Living - Steve Gurney
14. IONA Senior Services - Roberta Douglas
15. Lockheed Martin Corporation - Rosemary Neu
16. Marathon Oil Company - Laura Hoffman

17. Mead Corporation - Jim Bell
18. National Agricultural Library - Jane Snyder
19. National Association of People with AIDS - Jeff Crowley
20. National Association of Retired Federal Employees - Robert Normandie
21. National Association of Social Workers - Tracy Whittaker
22. National Consumers League - Brett Kay
23. National Health Council - Jennifer L. Taylor
24. National Library of Medicine - Catherine R. Selden
25. National Rural Health Association - Darin Johnson
26. Occidental Petroleum Corporation - Michelle Zender
27. Office of Disease Prevention and Health Promotion - Mary Jo Deering
28. Office of Minority Health Resource Center - Dr. Jose T. Carneiro and LaJoy Mosby
29. Presbyterian Church USA, Board of Pensions - Gwen Holmes
30. Procter & Gamble - Marie E. Schoeny
31. SeniorNet - Ann Wrixon
32. Substance Abuse and Mental Health Services/ Office of Managed Care - Dr. Eric Goplerud
33. Summit Health Coalition - Ruth Perot
34. United Auto Workers - Sharon Meadows
35. United Cerebral Palsy, Institute on Disability and Managed Care - Theda Zawaiza, Ph.D.
36. United Senior Health Cooperative - Anne Werner
37. Venator Group, Inc.- Rita Welz
38. Washington Business Group on Health - Sally Coberly